

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To Charles Day

Street, Apt. No.,
or PO Box No. 11-13 Doyers St.

City, State, ZIP+4 NV, NV! 10013

PS Form 3800, January 2001

See Reverse for Instructions

7001 1940 0001 2179 9924